



TSJ/EMD/C-27/147/2024

28 June 2024

The Member Secretary  
Jharkhand State Pollution Control Board  
T.A. Division Building,  
HEC Campus, Dhurwa  
Ranchi- 834004

**Sub.: Submission of Annual Report for Tata Main Hospital, Tata Steel Limited at Jamshedpur for the calendar year 2023 as per the Bio-Medical Waste Management Rules, 2016**

Ref: BMW authorization vide no. JSPCB/HO/RNC/BMW-14216369/2023/1 dated: 08.01.2023

Dear Sir,

With reference to the captioned subject & cited reference, we are herewith submitting the Annual Report for Tata Main Hospital, Tata Steel Limited at Jamshedpur for the calendar year 2023 as per the Bio-Medical Waste Management Rules, 2016.

You are requested to kindly acknowledge the same and place in your records.

Thanking you  
Yours faithfully,

For Tata Steel Limited

**Utsav Kashyap**

**Head Environment Clearance & Compliance (TSL)**

Encl.: As above

Copy to: The Regional Officer,  
Jharkhand State Pollution Control Board,  
Regional Office-cum-Laboratory MB/15,  
New Housing Colony, Adityapur, Jamshedpur

**TATA STEEL LIMITED**

Environment Management Jamshedpur 831 001 India

Mob- 8092087043 (M) e-mail utsav.kashyap@tatasteel.com

Registered Office Bombay House 24 Homi Mody Street Fort Mumbai 400 001

Tel 91 22 66658282 Fax 91 22 66657724

Corporate Identity Number L27100MH1907PLC000260 Website [www.tatasteel.com](http://www.tatasteel.com)

**Form - IV**  
**(See rule 13)**  
**ANNUAL REPORT**

Bio-Medical Waste Management Rules, 2016.

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year 2023, by the occupier of health care facility (HCF)]

S.No.	Particulars	
1	a. Particulars of the Occupier	
	(i) Name of the authorized person (occupier or operator of the facility)	Mr. T. V. Narendran CEO & MD, Tata Steel
	(ii) Name of HCF or CBMWTF	Tata Main Hospital
	(iii) Address for Correspondence	Northern Town, Bistupur Jamshedpur - 831001
	(iv) Address of Facility	Tata Main Hospital, Tata Steel Ltd., Jamshedpur
	(v) Tel. No, Fax. No	0657-2224559, 0657- 2423525
	(vi) E-mail ID	tsj.env@tatasteel.com
	(vii) URL of Website	<a href="https://www.tatamainhospital.com/">https://www.tatamainhospital.com/</a>
	(viii) GPS coordinates of HCF or CBMWTF	Latitude - 22.801 E Longitude - 86.180 N
	(ix) Ownership of HCF or CBMWTF	Private (State Government or Private or Semi Govt. or any other)
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Authorization No. JSPCB/HO/RNC/BMW-17366428/2023/38 Dt. 22/12/2023 Valid upto 31.12.2025
	(xi). Status of Consents under Water Act and Air Act	Authorization No. JSPCB/HO/RNC/CTO-16719279/2023/1843 dt. 2023-10-27 valid till 31.12.2025
2	Type of Healthcare Facility	
	(i) Bedded Hospital	Public Health No. of beds 983
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	Not Applicable

S.No.	Particulars																																																			
	(iii) License number and its date of expiry	SG31072/30414/2913 (BISTUPUR) 07.06.2025																																																		
3	<b>Details of CBMWTF</b>		Not Applicable																																																	
	(i) Number healthcare facilities																																																			
	covered by CBMWTF (ii) No of beds covered by CBMWTF																																																			
	(iii) Installed treatment and disposal capacity of																																																			
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF																																																			
4	<b>Quantity of waste generated or disposed in Kg per annum (on monthly average basis &amp; Yearly)</b>	Yellow Category: Monthly Average 3,734 kg		Yellow Category 44,810 kg																																																
		Red Category: Monthly Average 7,241 kg		Red Category: 86,893 kg																																																
		White: Monthly Average 485 kg		White: 5,823 kg																																																
		Blue Category: Monthly Average 1,807 kg		Blue Category :21694 kg																																																
5	<b>Details of the Storage, treatment, transportation, processing and Disposal Facility</b>																																																			
	(i) Details of the on-site storage facility	Size: 92*48 FT (4416 Sqft)																																																		
		Capacity: 500 Kg/per day																																																		
		Provision of on-site storage- Impervious shaded storage																																																		
	(ii) (ii) Details of Disposal facilities	<table><tr><th>Type of treatment equipment</th><th>No of units</th><th>Capacity (kg/day)</th><th>Quantity treated or disposed in kg per annum</th></tr><tr><td>Incinerators</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Plasma Pyrolysis</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Autoclaves</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Microwave</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Hydroclave</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Shredder</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Needle tip cutter or Destroyer Sharps</td><td>100</td><td>-</td><td>-</td></tr><tr><td>Encapsulation or Concrete pit</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Deep burial pits</td><td>0</td><td>NA</td><td>NA</td></tr><tr><td>Chemical Disinfection</td><td>1</td><td>100 KLD</td><td>82 KLD</td></tr><tr><td>Any other treatment equipment</td><td>0</td><td>NA</td><td>NA</td></tr></table>			Type of treatment equipment	No of units	Capacity (kg/day)	Quantity treated or disposed in kg per annum	Incinerators	0	NA	NA	Plasma Pyrolysis	0	NA	NA	Autoclaves	0	NA	NA	Microwave	0	NA	NA	Hydroclave	0	NA	NA	Shredder	0	NA	NA	Needle tip cutter or Destroyer Sharps	100	-	-	Encapsulation or Concrete pit	0	NA	NA	Deep burial pits	0	NA	NA	Chemical Disinfection	1	100 KLD	82 KLD	Any other treatment equipment	0	NA	NA
Type of treatment equipment	No of units	Capacity (kg/day)	Quantity treated or disposed in kg per annum																																																	
Incinerators	0	NA	NA																																																	
Plasma Pyrolysis	0	NA	NA																																																	
Autoclaves	0	NA	NA																																																	
Microwave	0	NA	NA																																																	
Hydroclave	0	NA	NA																																																	
Shredder	0	NA	NA																																																	
Needle tip cutter or Destroyer Sharps	100	-	-																																																	
Encapsulation or Concrete pit	0	NA	NA																																																	
Deep burial pits	0	NA	NA																																																	
Chemical Disinfection	1	100 KLD	82 KLD																																																	
Any other treatment equipment	0	NA	NA																																																	

S.No.	Particulars		
	(iii) Quantity of recyclable wastes sold authorized recyclers after treatment in kg per annum		Red Category (like plastic, glass etc.) 86,893 kg
	(iv) No of vehicles used for collection and transportation of biomedical waste	One	
	v) Details of ETP sludge generated and disposed during the treatment of wastes in Kg per annum	242 Kg Disposed to M/s Adityapur Waste Management Pvt. Ltd.,	
	(vi) Name of the Common Bio-Medical Waste — Treatment Facility Operator through which wastes are disposed of	M/s Adityapur Waste Management Pvt. Ltd., (Seraikella Kharsawan)	
	(vii) List of members HCF not handed over Bio-medical waste	NA	
6	Do you have Bio-medical waste management? If yes, attach minutes of the meetings held during the reporting period	Yes	Minutes of the meeting attached as Annexure II
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training being conducted on monthly so far (v) whether standard manual for training is available? (vi) any other information)	10  47 BMW handlers trained (apart from other staff) 100% induction to all staff joining organization  Nil Yes, with Infection control committee Nil	Attached as Annexure III
8	Details of the accident occurred during the year	Nil	
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected	Nil	
	(iii) Remedial Action taken (Please attach details if any)	NA	
	(iv) Any Fatality occurred	Nil	
9	Are you meeting the standards of air pollution; from the incinerator, How many times in last year could not meet the standards?	NA, as we are sending all BMW to CBWTF	
10	Details of Continuous online emission monitoring systems installed	NA	

S.No.	Particulars		
11	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		28,597 KL. Liquid Waste generated that are treated in Effluent treatment plant. The treated effluent meets the prescribed standards.
12	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		
13	<b>Any other relevant information</b>	NA	NA

Certified that the above report is for the period from 01.01.2023 to 31.12.2023.

Date:

Place: Jamshedpur

Encl: 1. Annexure - I  
2. Annexure - II  
3. Annexure - III

*Dr. Sudhir Rai*  
22/6/24

*Rai*  
22/6/24  
Air Vice Marshal (Retd.) Dr. Sudhir Rai  
General Manager (Medical Services)  
Tata Steel Limited

# Annexure - I

## Annexure 1

\*Note: Data is inclusive of Covid and Non-Covid Waste generation during the year 2023

### Tata Main Hospital, Jamshedpur Details of Bio Medical Waste generation (2023)

Category	Type of Waste (kg)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Yellow	(a) Human Anatomical waste	214	173	194	173	177	178	192	210	336	308	291	243	2689
	(b) Animal Anatomical waste	0	0	0	0	0	0	0	0	0	0	0	0	0
	(c) Soiled Waste	3211	2588	2912	2602	2651	2671	2886	3151	5033	4619	4367	3639	40329
	(d) Expired or Discarded Medicine	0	0	0	0	0	0	0	0	0	0	0	0	0
	(e) Chemical waste	20	25	25	43	25	18	12	15	12	25	20	25	265
	(f) Microbiology, Biotechnology and other clinical laboratory waste	143	115	129	116	118	119	128	140	224	205	194	162	1792
	Sub Total (Yellow)	3567	2876	3235	2891	2946	2968	3207	3501	5592	5133	4852	4043	45075
Red	(g) Chemical Liquid Waste	2512	1983	2274	2428	2591	2520	2410	2284	2315	2421	2395	2463	28597
	(h) Discarded linen, mattresses, beddings contaminated with blood or body fluid	172	136	156	166	177	172	165	156	158	166	164	169	1957
	Sub Total (Red)	6631	6559	7014	6674	6845	6627	6923	7738	8693	7832	7168	8188	86893
White (Translucent)	Waste Sharpes including Metals:	624	390	456	418	441	443	532	486	555	468	387	622	5823
	Sub Total (White)	624	390	456	418	441	443	532	486	555	468	387	622	5823
Blue	(a) Glassware	1803	1602	1682	1548	1605	1538	1651	1850	2205	2055	1844	2095	21477
	(b) Metal Body Implants	18	16	17	16	16	16	17	19	22	21	19	21	217
	Sub Total (Blue)	1821	1618	1699	1563	1621	1554	1668	1869	2228	2075	1862	2116	21694
Total Waste (kg)		12643	11443	12404	11547	11854	11591	12331	13594	17068	15508	14270	14969	159485



## Annexure - 2

### Minutes of Meeting

Name of the Meeting : Biomedical Waste Management Committee  
 Held On : 14/10/23.  
 Time : 12:30 – 01.00PM  
 Agenda:

#### Members: -

Sl. No.	Designation / Appointment	Name
1	Chairman (CMSS)	Dr Mamta Rath Datta
2	Convener	Dr Minakshi Gupta
3	Head Admin	Dr Chirantan Bose*
4	Nursing Superintendent	Sr Mary Kuttu Babu*
5	Sr Manager, Administration	Kumar Lilanand*
6	Chairman ICC	Dr Srividhya
7	Sr Rita Giri	Nodal Officer BMW
8	Dr Suravi Mohapatra	TMH Clinics I/C
9	Dr Suparna Paul	Baridih
10	Dr Vishakha Verma	Sonari
11	Dr Nilov Sen	Uliyan*
12	Dr Atul Chhabra	Tubes
13	Dr Subha Dev	Sidhgora
14	Dr Latika	South Park
15	Dr Durgesh Nandini	Kadma
16	Dr Seema Gupta	Sakchi

- Absent

#### Minutes

Sl. No.	Points / Issues	Action by	Completion date by	Status
1	Review of current Biomedical Waste Mngment policy, with emphasis on COVID requirements	All representatives	10 /07/21	Done
2	Identifying gaps as per new policy	All representatives	10 /07/21	Done
3	Revision of Manual	Dr Srividhya Dr M Gupta	20 /07/21	Done
4	Requirement/Feasibility of implementing barcoding at point of origin of waste, rather at disposal site from hospital	All members	10 /07/21	Done
5.	Compliance to labelling waste bags at ward level	Kumar Lilanand	07/07/21	Done
7.	Visit to <del>Adityapur</del> facility, may be at 6 <del>monthly interval</del> to crosscheck compliance with safe disposal as per	Dr Srividhya Dr M Gupta	10/07/21	Visit scheduled During 1 <sup>st</sup> week of Feb <del>Dipnand</del> to coordinate Team comprising of Dr Minakshi Gupta, Dr Uma



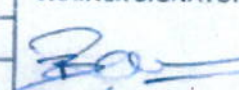

	policy, approval to be taken from Sr <del>Management</del>	Kumar Lilanand Sr Rita Giri	Oct'22	Shankar Saha and Mr D Pradhan visited Adityapur facility on 11 <sup>th</sup> Feb 22  Next visit to be scheduled in October'22
8	Appointing designated Biomedical Nodal Officer	Dr Ashok Chattoraj Dr Chirantan	15/12/21 05/04/22	Done Sr Rita Giri <u>appointed</u>
9	<u>Non infectious</u> waste to go into black in COVID wards	Dr Chirantan Mr Lilanand		JUSCO not agreeing to collect general waste from COVID wards
10	Training on BMW <del>alongwith</del> ICC	Dr Minakshi Gupta Dr Srividhya		Ongoing
10	Bags to be labelled with wards in steward office, before distribution	Mr Lilanand	10/02/22 31/10/22	To be monitored through BMW Audit
11	Blood bags and vacutainers disposal after sterilization	Dr Chattoraj Dr Chirantan Kumar Lilanand Minakshi Gupta	28/02/22 05/04/22  30/09/22	Done
12	Bins and plastics to have Cytotoxic waste symbol/sticker in wards disposing cytotoxic waste	Kumar Lilanand <del>Dipnand</del> Pradhan	28/02/22 05/04/22 15/07/22	Order for stickers <u>placed</u> BMW Stickers in place Cytotoxic stickers not yet <u>supplied</u>  Stickers in place
13	Procurement of Red and yellow autoclavable plastics	Kumar Lilanand	15/07/22  30/09/22	Different capacity- small <u>yellow</u> (blood bags) and medium/big sized red plastic(vacutainer)  Done
14	Compliance to glass waste disposal	Dr Chirantan Kumar Lilanand	28/02/22 05/04/22	Financial implications to be worked upon and proposal to be given for GMMS approval.
15	Revised BMW protocol poster to be displayed	Kumar Lilanand	15/07/22 30/09/22	Done
16	Barcoding of BMW bags at clinics	Dr Chirantan Kumar Lilanand Dr Suravi	30/09/22	Done
17	Labelling of waste bags at clinics	Kumar Lilanand Dr Suravi	30/09/22	Done
18	Inventory and SOP related to points 16 and 17	Dr Suravi	30/09/22	One time indent of consumables for clinics, shall be done by <u>Admin</u> <u>on</u> behalf of clinics, to be



			23/12/22	collected by Suravi Madam. Done
19	Visit to Adityapur CBMWTF	Dr Suravi Sr Rita Giri	23/12/22	Done
20	Training for Barcoding- both I/C s and for attendant	Kumar Lilanand Dr Suravi	30/09/22	To be scheduled, once barcoding system is in place, as per mutually convenient dates, preferably on Tuesdays. Done
21.	Revision of BMW Committee	Dr Minakshi Gupta	22/04/23	Done
22.	Displayed posters to be checked as per issue raised in patient safety audit	Dr Srividhya Dr Minakshi Gupta	22/04/23	Done (posters are as per BMW Guidelines, patient safety audit checklist needs amendment)
23	SOP Revisit and revision if required	Dr Minakshi Gupta	22/04/23	Done
24	Checking for observations made during Team visit of CBWTF with I/C CBWTF, Adityapur, specially pertaining to expired CTO	Dr Minakshi Gupta	29/06/23	Mail Communication done and received renewed CTO document on 30/06/23
25	Autoclave breakdown	Dr Minakshi Gupta Prashant	29/06/23	Repaired
26	Irregular pick-up of BMW from Dispensary	Admin	14/10/23	
27	Labelling of bags with at the point of generation (ward names)-	Admin	14/10/23	Not done regularly
28	CTO letter from Adityapur facility- validity	Kumar Lilanand	14/10/23	Validity mentioned in CTO as- from date of issue to-30/09/23 Needs clarification
29	Planning for 3 <sup>rd</sup> visit to CBWTF	Dr Chirantan	14/10/23	1 <sup>st</sup> visit- Feb 22 2 <sup>nd</sup> visit-Dec 22

A. Minuted by: -  
Name: - Dr Minakshi Gupta

3. Annexure - III

<b>RARE HOSPITALITY &amp; SERVICES PVT. LTD.</b>			
<b>CONTROLLED</b>			
Rare Hospitality & Services Pvt. Ltd.			 <small>RARE Hospitality &amp; Services Pvt. Ltd. An IIS Group Enterprise</small>
Document no:	Revision No: 01		
RHS/OPS/01:	Revision Date: 01/11/08		
<b>TRAINING RECORD SHEET</b>			
DATE: 24-10-2023		SITE: TATA MAIN Hospital	
TIME: FROM 1:20pm TO 1:50pm		TRAINER: Rakesh SAIN	
TOPICS COVERED: BMW Segregation			
SL NO	NAME OF TRAINEE	SIGNATURE OF TRAINEE	REMARKS
1	Laxmi Ghosh	Laxmi Ghosh	Good
2	Tushar Khanna	Tushar	
3	Deepak Pandi	Deepak Pandi	
4	Chandan P. Mukhi	चंदन प. मुखी	
5	Anju Gogoi	Anju Gogoi	
6	Bir Singh Munda	Bir Singh munda	
7	Sumita J. Karan	Sumita Karan	
8	Sumaina Samad	Sumaina Samad	
9	MD. MUTEER	MD-muteer	
10	S. Sangeeta	Sangeeta	
11	UMA LY Bora	उमा ली बोर	
12	Alim Akhtar	अलिम अख्तर	
13	Sudish Mukhi	Sudish	
14	Partho Mukhi	PARTHO	
15	Jitender Thakur	J. Thakur	
16	Mohan	Mohan	
17	Litil Mukhi	Litil mukhi	
18	Chanda B. Mukhi	चंदा मुखी	
19			
20			
CLIENT SIGNATURE: 			<b>TRAINER SIGNATURE</b> 
SITE IN CHARGE SIGNATURE: 			



# RARE HOSPITALITY & SERVICES PVT. LTD.

CONTROLLED

Rare Hospitality & Services Pvt. Ltd.

Document no:

Revision No: 01

RHS/OPS/01:

Revision Date: 01/11/08



An ISO 9001:2008 Certified Enterprise

## TRAINING RECORD SHEET

DATE: 16-11-2023

SITE: TATA MAIN Hospital

TIME: FROM 1:20 PM TO 2:05 PM

TRAINER: Rakent Swain

TOPICS COVERED:

Bio Medical WASTE Management.

SL NO	NAME OF TRAINEE	SIGNATURE OF TRAINEE	REMARKS
1	Rajeshwari	12108921414	Good
2	J. Chandraiah	J. Ch	
3	Minskehi	Minskehi kamski	
4	Anjali Das Chelala	Anjali Dasgupta	
5	Halsna Mukhi	Halsna Mukhi	
6	Mala Devi	Mala Devi	
7	Reema Devi	Reema's Mukhi	
8	Tulsi Nay	Tulsi Nay	
9	Sushila Devi	Sushila Devi	
10	Prasanna	Prasanna	
11	Sadhu Ram Bang	Sadhu ram Bang	
12	Govinda	Govinda	
13	Sudama K	Sudama K	
14	Bibha Mukhi	Bibha Mukhi	
15	Hamin Devi	Hamin devi	
16	Chikita Hamin	Chikita Hamin	
17	Noona Mukhi	Reema	
18			TRAINER SIGNATURE
19			
20			

CLIENT SIGNATURE:

SITE IN CHARGE SIGNATURE: